PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1994

Application or Docket Number

512505

| (Column 1) (Column 2) | | | | | | SMALL | OR | OTHER THAN OR SMALL ENTITY | | |
|---|--|---|--------------|---|------------------|---------------------|------------------------|----------------------------|---------------------|---|
| FOR | | NUMB | NUMBER FILED | | NUMBER EXTRA | | FEE | | RATE | FEE |
| BASIC FEE | | | | | | 365.00 | OR | | 730.00 | |
| TOTAL CLAIMS | | | minu | s 20 = * | | x\$11= | | OR | x\$22= | |
| INDEPENDENT CLAIMS 3 = * | | | | | x38= | | OR | x76= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | | +240= | , , , , , , , , , , , , , , , , , , , |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | 365 | OR | <u> </u> | 720 |
| CLAIMS AS AMENDED - PART II | | | | | | | 363 | OR | TOTAL | 750 |
| | (Column 1) (Column 2) (Column 3) | | | | | SMALL | OR | OTHER THAN OR SMALL ENTITY | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 10 | Minus | - 20 | = | x\$11= | | OR | x\$22= | |
| | Independent | 2 | Minus | 3 | = | x38= | | OR | x76= | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +120= | | QЯ | +240= | |
| (Column 1) (Column 2) (Column 3) | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ODIT. FEE | |
| MENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | x\$11= | | OR | x\$22= | |
| | Independent | * | Minus | *** | = | x38= | | QR | x76= | |
| ٩ | FIRST PRE | SENTATION OF | MULTIPLE | DEPENDENT C | LAIM | +120= | | OR | +240= | |
| (Column 1) (Column 2) (Column 3) | | | | | | TOTAL ADDIT. FEE | | OR , | TOTAL ADDIT. FEE | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | x\$11= | | OR | x\$22= | |
| | Independent | * | Minus | *** | = | x38= | | OR | x76= | |
| ∀ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | OR | +240= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |